



JFW

Sample Form (09-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of:

MICHAEL A. RUSSELL, CLAUDE A. VIDAL ET AL

Application No.

10/634,513

Filed:

August 4, 2003

Title:

ANESTHESIA MANIFOLD AND INDUCTION VALVE

Attorney Docket No.

A-9554

Art Unit:

3763

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
SANFORD T. COLB	26,856

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does **not** have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

SIGNATURE of Practitioner of Record

Signature	<i>Martin P. Hoffman</i>	Date	<i>Dec. 5, 2005</i>
Name	Martin P. Hoffman	Registration No., if applicable	22,261
Telephone	(703) 415-0100		

This form offers a sample or suggested format for an authorization for an agent. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.